## **AOSE/PE Report for**

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GPIN or Tax Ma		, Subdivision,, np # de	County
Applicant or Client and address: Pre		epared by AOSE/PE (name and address):	
Date of Report:		AOSE/PE Job Number:	(optional)
Revision Date:,		Health Dept. ID. No.:	
Contents/Index of this report: <sup>2</sup>			
Certification Statement(s) <sup>3</sup>			
I hereby certify that the evaluations and/or designs contained herein were conducted in accordance with the Sewage Handling and Disposal Regulations (12 VAC5-610), the Private Well Regulations (12 VAC5-615), and other applicable policies of the Virginia Department of Health. Furthermore, I certify that my evaluation and/or design contained herein complies with all applicable laws, regulations, and policies implemented by the Virginia Department of Health.  I recommend a		AOSE/PE Stamp(s) (Sign and Date)	

<sup>&</sup>lt;sup>1</sup> Insert appropriate title: "Construction Permit", "Subdivision Approval", "Certification Letter"

<sup>&</sup>lt;sup>2</sup> Examples include: "Soil Information Summary", "Soil Profile Descriptions", "Water Supply Design Specifications",

<sup>&</sup>quot;Primary/Reserve Design Specifications", "Construction Drawings", "Site Sketch", "Product Specification Sheet"

<sup>&</sup>lt;sup>3</sup> PE work is regulated by the Department of Professional and Occupational Regulation. This section is considered optional for PEs.

<sup>&</sup>lt;sup>4</sup> Fill in this blank with the appropriate term: "certification letter", "construction permit", or "subdivision approval"

<sup>&</sup>lt;sup>5</sup> Fill in this blank with the appropriate term: "approved", or "denied"